

# Advancing Value-Based Care and Healthcare Transformation

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January 30, 2023

# The CMS Innovation Center Statute

“The purpose of the [Center] is to test innovative payment and service delivery models to reduce program expenditures...while preserving or enhancing the quality of care furnished to individuals under such titles”



## Three Scenarios for Success:

1. **Quality improves; cost neutral**
2. **Quality neutral; cost reduced**
3. **Quality improves; cost reduced (best case)**

If a model meets one of these three criteria and other statutory prerequisites, the statute allows the Secretary to expand the duration and scope of a model through rulemaking

# Vision: What's to Come Over the Next 10 Years





# Drive Accountable Care

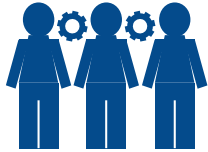
- **Aim:** Increase the number of beneficiaries in a care relationship with accountability for quality and total cost of care
- **Impact on Beneficiaries:** Beneficiaries in accountable care relationships will experience more person-centered, seamless care that supports their health and care goals

# ACO REACH Model

The **redesigned ACO REACH Model** will inform the Medicare Shared Savings Program and future models by making important changes to the **existing Global and Professional Direct Contracting Model**

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## Advance Health Equity



the model will use an **innovative payment approach** to better support care delivery and coordination for patients in underserved communities and require participants develop and implement a robust health equity plan to **measurably reduce health disparities** within their beneficiary populations

## Promote Provider Leadership & Governance



to ensure **health care providers continue to play a primary role** in accountable care, at least 75% control of each ACO's governing body will be held by participating providers or their designated representatives; ACOs will be required to include at least one **Medicare beneficiary** and at least one **consumer advocate**, both of whom must hold voting rights

## Protect Beneficiaries & the Model



through increased up-front screening of applicants, robust monitoring of participants, and **greater transparency** into the model's progress even before final evaluation results, as well as **stronger protections** against inappropriate coding and risk score growth

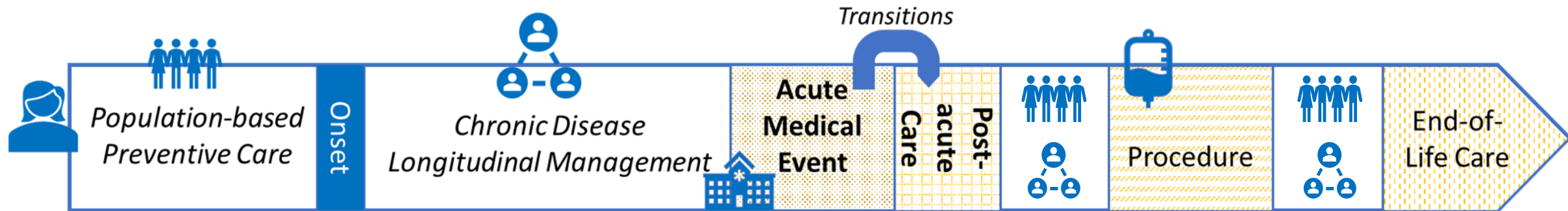
# The CMS Innovation Center's Strategy to Support Person-centered, Value-based Specialty Care

1

Increase Transparency Through Enhanced Data Sharing and Specialist Performance Measures

2

BPCI Advanced Extension  
Mandatory Episode Payment Model



3

Specialist Engagement with Advanced Primary Care

4

ACO Condition and Procedure Management



# Advance Health Equity

- **Aim:** Embed health equity in every aspect of Innovation Center models and increase focus on underserved populations
- **Impact on Beneficiaries:** Underserved beneficiaries will have increased access to accountable, high-quality, and person-centered care. Model tests will then allow for robust evaluation and confidence in generalizing results to all of the populations served through CMS programs



# Support Innovation

- **Aim:** Leverage a range of supports that enable integrated, person-centered care, such as actionable, practice-specific data, technology, dissemination of best practices, peer-to-peer learning collaboratives, and payment flexibilities
- **Impact on Beneficiaries:** Models will measure meaningful patient outcomes and care experience and will make data, tools, and payment flexibilities available to health care providers to support accountable, person-centered care





# Address Affordability

- **Aim:** Pursue strategies to address health care prices, affordability, and reduce unnecessary or duplicative care
- **Impact on Beneficiaries:** Innovation Center models can promote affordability and access to high-value care for beneficiaries through changes such as reducing cost-sharing for services and treatments



# Partner to Achieve System Transformation

- **Aim:** Align priorities and policies across CMS and aggressively engage payers, purchasers, states, and beneficiaries to improve quality, achieve equitable outcomes, and reduce health care costs
- **Impact on Beneficiaries:** Closer engagement with beneficiaries, caregivers, and patient groups across the lifecycle of models will help ensure that models are meeting people's needs

## Patient Experience – Shared by a Safety Net Provider Participant

- **Aim:** Align priorities and policies across CMS and aggressively engage payers, purchasers, states, and beneficiaries to improve quality, achieve equitable outcomes, and reduce health care costs
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# Innovation Center Roadmap | Models, Initiatives, and Engagement

## Stakeholder Engagement & Learning

- Health Care Payment Learning and Action Network (LAN)
- Listening Sessions and Webinars

2022

- Kidney Care Choices Model launched
- **Announced models:**
  - ACO REACH Model
  - Enhancing Oncology Model (EOM)
  - Two-year extension of Bundled Payment for Care Improvement Advanced (BPCI Advanced) Model

2023-2024

- Advanced primary care model tests
- State total cost of care model tests
- Population and condition-specific accountable care models
- Bundled payment models to support population health
- Prescription drug models

2025-2029

- ACO model tests that support primary care and accountability for total cost of care and outcomes
- Bundled payment models to support population health
- Population & condition-specific accountable care models
- Specialty integration models

## Cross-Model Issues

- Health equity data collection
- Risk adjustment
- Multi-payer alignment
- Data access and transparency
- SDoH screening and referral
- Beneficiary engagement
- Medicaid alignment
- Benchmarking

# Where Can Innovators Go for More Information?

[Sign up to receive regular email updates](#) about the CMS Innovation Center, including opportunities to engage with, provide input on and potentially participate in model tests.

Visit the [CMS Innovation Center](#) website and [Strategic Direction](#) webpage.

Visit the [CMS Innovation Center Models](#) webpage (and [Medicare Shared Savings Program](#) site) to see current participant geographic and contact information\*. You can also see which models are currently [enrolling](#).

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## Q&A